

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>h</i>		05/15/01
O.I.P.E. CLASSIFIER	<i>ma</i>		5/31/01
FORMALITY REVIEW	<i>ha</i>	720	07-10-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 +/- ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	✓
2	✓
3	✓
4	✓
5	0
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
13	✓
14	0
15	0
16	✓
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18	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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